

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

ADDRESS (number and street)

5850 ELIZABETH AVE

☐Check if different  
than previously  
reported. (ACC)

ST. LOUIS

MO

63110

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00041939

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☒October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

ROBERT J EGAN

Signature of Treasurer

Electronically Filed by ROBERT J EGAN

Date

10

08

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		166615.27
(b) Cash on Hand at Beginning of Reporting Period .....	179433.13	
(c) Total Receipts (from Line 19) .....	34114.89	109211.11
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	213548.02	275826.38
7. Total Disbursements (from Line 31) .....	63500.00	125778.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	150048.02	150048.02
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	33948.00	104042.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	33948.00	104042.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	33948.00	104042.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	100.00	4950.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	66.89	219.11
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	34114.89	109211.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	34114.89	109211.11

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	268.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	268.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	63500.00	125510.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	63500.00	125778.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	63500.00	125778.36

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	33948.00	104042.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33948.00	104042.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	268.36
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	268.36

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT DANIEL FAGAN

Mailing Address 1465 HERITAGE LANDING #104

City

ST CHARLES

State

MO

Zip Code

63303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	0	8

Transaction ID: SA16.7872

Amount of Each Receipt this Period

100.00

RETURN OF CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) .....

100.00

TOTAL This Period (last page this line number only) .....

100.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 31

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A.

Full Name (Last, First, Middle Initial)

12TH DISTRICT LEGISLATIVE COMMITTEE

Mailing Address 1114 SPENCER RD

City State Zip Code  
ST PETERS MO 63376

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7840

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 04 2008

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

12TH WARD DEMOCRATIC ORGANIZATION

Mailing Address 3812 TESSON CT

City State Zip Code  
ST LOUIS MO 63125

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7761

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
07 21 2008

Amount of Each Disbursement this Period

100.00

C.

Full Name (Last, First, Middle Initial)

12 WARD REGULAR DEMOCRATIC ORGANIZATION

Mailing Address 8104 PARKWOOD

City State Zip Code  
ST LOUIS MO 63123

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7856

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
09 04 2008

Amount of Each Disbursement this Period

120.00

**SUBTOTAL** of Disbursements This Page (optional) .....

720.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.** Full Name (Last, First, Middle Initial)  
26TH WARD DEMOCRATIC LEAGUE

Mailing Address PO BOX 45466

City State Zip Code  
ST LOUIS MO 63108

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7751

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 7 / 1 5 / 2 0 0 8

Amount of Each Disbursement this Period

150.00

**B.** Full Name (Last, First, Middle Initial)  
87TH DEMOCRATIC LEGISLATIVE DIST COMM

Mailing Address #30 WILLOW HILL DR

City State Zip Code  
LADUE MO 63124

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7773

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 7 / 2 1 / 2 0 0 8

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
BAKER FOR CONGRESS

Mailing Address PO BOX 312

City State Zip Code  
COLUMBIA MO 65205

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7841

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 0 4 / 2 0 0 8

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7150.00

**TOTAL** This Period (last page this line number only) .....



<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29	<input type="checkbox"/>	30b

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)  
CAPE COUNTY DEMOCRATS

Mailing Address PO BOX 102

City JACKSON State MO Zip Code 63755

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7867

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
CITIZENS FOR CHARLIE NORR

Mailing Address PO BOX 1936

City SPRINGFIELD State MO Zip Code 65801

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7809

Date of Disbursement

08 / 21 / 2008

Amount of Each Disbursement this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)  
CITIZENS FOR JOSEPH GAMBINO

Mailing Address 1923 DOVERCLIFF CT

City CHESTERFIELD State MO Zip Code 63017

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7785

Date of Disbursement

07 / 30 / 2008

Amount of Each Disbursement this Period

125.00

**SUBTOTAL** of Disbursements This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

**A.**Full Name (Last, First, Middle Initial)  
CITIZENS FOR MIKE TALBOY

Mailing Address 21 W 10TH ST #7E

City KANSAS CITY State MO Zip Code 64105

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7812

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	1	/	2	0	0	8

Amount of Each Disbursement this Period

325.00

**B.**Full Name (Last, First, Middle Initial)  
CITIZENS FOR TED HOUSE

Mailing Address PO BOX 1121

City ST CHARLES State MS Zip Code 63302

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7836

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	2	/	2	0	0	8

Amount of Each Disbursement this Period

140.00

**C.**Full Name (Last, First, Middle Initial)  
CITIZENS FOR VICKI LORENZ ENGLUND

Mailing Address PO BOX 270545

City ST LOUIS State MO Zip Code 63127

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7861

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	0	8

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) .....

790.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A.

Full Name (Last, First, Middle Initial)

CITIZENS TO ELECT CHUCK GRAHAM

Mailing Address 102 WEST GREEN MEADOWS

City COLUMBIA State MO Zip Code 65203

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7846

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

CITIZENS TO ELECT DEVEYDT

Mailing Address PO BOX 952

City SULLIVAN State MO Zip Code 63080

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7862

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)

CITIZENS TO ELECT HARRY WYSE

Mailing Address PO BOX 498

City CHILICOTHE State MO Zip Code 64601

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7829

Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) .....

2650.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A.

Full Name (Last, First, Middle Initial)

CITIZENS TO ELECT JAMILAH NASHEED

Mailing Address 4710 LEE AVE

City  
ST LOUIS

State  
MO

Zip Code  
63115

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7746

Date of Disbursement

07 / 02 / 2008

Amount of Each Disbursement this Period

325.00

B.

Full Name (Last, First, Middle Initial)

CITIZENS TO ELECT JOHN COTTLE

Mailing Address 415 7TH ST

City  
TROY

State  
MO

Zip Code  
63379

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7786

Date of Disbursement

07 / 30 / 2008

Amount of Each Disbursement this Period

200.00

C.

Full Name (Last, First, Middle Initial)

CITIZENS TO ELECT OXFORD

Mailing Address PO BOX 19112

City  
ST LOUIS

State  
MO

Zip Code  
63118

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7852

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

325.00

**SUBTOTAL** of Disbursements This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)

JOHN CLARK

Mailing Address 6720 BANCROFT AVE

City  
ST LOUIS

State  
MO

Zip Code  
63109

Purpose of Disbursement  
CONVENTION EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7879

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)

CLINT ZWEIFEL FOR TREASURER

Mailing Address 8420 DELMAR BLVD STE 501A

City  
ST LOUIS

State  
MO

Zip Code  
63124

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT ED KEMP

Mailing Address PO BOX 156

City  
MORSE MILL

State  
MO

Zip Code  
63066

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7768

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**3675.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

<b>A.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT JASON HOLSMAN</b> Mailing Address <b>PO BOX 480573</b>	<b>Transaction ID:</b> SB29.7802 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 1 / 2 0 0 8</div> </div>
City <b>KANSAS CITY</b> State <b>MO</b> Zip Code <b>64131</b> Purpose of Disbursement <b>DONATION</b> Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Amount of Each Disbursement this Period</b> <div>325.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT JERRY DAUGHERTY</b> Mailing Address <b>PO BOX 1533</b> City <b>ST CHARLES</b> State <b>MO</b> Zip Code <b>63301</b> Purpose of Disbursement <b>DONATION</b> Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB29.7850 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT JIM VOLMERT</b> Mailing Address <b>25 SOUTHFIELD CT</b> City <b>MOSCOW MILLS</b> State <b>MO</b> Zip Code <b>63362</b> Purpose of Disbursement <b>DONATION</b> Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>Transaction ID:</b> SB29.7776 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>100.00</div>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**925.00**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT JOAN BARRY

Mailing Address PO BOX 510678

City  
ST LOUIS

State  
MO

Zip Code  
63151

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7845

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT LINDA R FISCHER

Mailing Address 3245 CEDAR FALLS RD

City  
BONNE TERRE

State  
MO

Zip Code  
63628

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7869

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT MARVIN MCMILLAN

Mailing Address 1261 COUNTY RD 401

City  
FRIEDHEIM

State  
MO

Zip Code  
63747

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7815

Date of Disbursement

08 / 22 / 2008

Amount of Each Disbursement this Period

325.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2650.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT MICHAEL WINDER

Mailing Address PO BOX 128

City MARQUAND State MO Zip Code 63655

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7817

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

325.00

**B.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT MIKE HEPLER

Mailing Address PO BOX 97

City MILAN State MO Zip Code 63556

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7798

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 1 / 2 0 0 8

Amount of Each Disbursement this Period

325.00

**C.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT NICK BEATTY

Mailing Address 1951 S COLLINSON

City SPRINGFIELD State MO Zip Code 65804

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7827

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

325.00

**SUBTOTAL** of Disbursements This Page (optional) .....

975.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT PAT LAMPING

Mailing Address PO BOX 205

City BARNHART State MO Zip Code 63012

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7767

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

**B.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT RICH HELTON

Mailing Address 26089 VALLEY LAKE DR

City WRIGHT CITY State MO Zip Code 63390

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7778

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT RON DANIELS

Mailing Address 286 SUNSWEPT DR

City TROY State MO Zip Code 63379

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

525.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

<b>A.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT SUE SCHOEMEHL	<b>Transaction ID:</b> SB29.7866 <b>Date of Disbursement</b>
Mailing Address 2629 BLUFF RIDGE DR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 4 / 2 0 0 8</div> </div>
City ST LOUIS State MO Zip Code 63129	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement DONATION	<div>1000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT DOROTHY STAFFORD	<b>Transaction ID:</b> SB29.7831 <b>Date of Disbursement</b>
Mailing Address #11 KIMBERWICKE CT	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 2 / 2 0 0 8</div> </div>
City FESTUS State MO Zip Code 63028	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement DONATION	<div>75.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT ED SCHIEFFER	<b>Transaction ID:</b> SB29.7788 <b>Date of Disbursement</b>
Mailing Address 183 THORNHILL CEMETERY RD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 8</div> </div>
City TROY State MO Zip Code 63379	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement DONATION	<div>325.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)

COMMITTEE TO RE-ELECT ED SCHIEFFER

Mailing Address 183 THORNHILL CEMETERY RD

City State Zip Code  
TROY MO 63379

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7835

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

**B.**

Full Name (Last, First, Middle Initial)

DAKE FOR 132ND

Mailing Address 1856 LAWRENCE 1135

City State Zip Code  
MILLER MO 65707

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7763

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

FANN FOR FAMILIES

Mailing Address 9 CRAIGWOOD DR

City State Zip Code  
ST PETERS MO 63376

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7753

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

775.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)

FRANKLIN COUNTY DEMOCRATIC CENTRAL COMMITTEE

Mailing Address PO BOX 274

City  
UNION

State  
MO

Zip Code  
63084

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7793

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

FRIENDS FOR FALLERT

Mailing Address 17079 STATE RT B

City  
STE GENEVIEVE

State  
MO

Zip Code  
63670

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7808

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS FOR KELLY SCHULTZ

Mailing Address 10455 E MEXICO GRAVEL

City  
COLUMBIA

State  
MO

Zip Code  
65202

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7810

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

**SUBTOTAL** of Disbursements This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A.

Full Name (Last, First, Middle Initial)  
FRIENDS FOR MICHAEL VOGT

Mailing Address 6035 WEBER RD

City ST LOUIS State MO Zip Code 63123

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7756

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

B.

Full Name (Last, First, Middle Initial)  
FRIENDS FOR SAM KOMO

Mailing Address 6026 CLEARVIEW

City HOUSE SPRINGS State MO Zip Code 63051

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7800

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)  
FRIENDS OF GINA WALSH

Mailing Address 1246 BAKEWELL

City ST LOUIS State MO Zip Code 63137

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.7865

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1150.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOE VACCARO INC

Mailing Address 2130 HAMPTON AVE

City ST LOUIS State MO Zip Code 63139

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7833

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	0	8

Amount of Each Disbursement this Period

325.00

**B.** Full Name (Last, First, Middle Initial)  
HEARTLAND OF AMERICA FORUM

Mailing Address 13 COUNTRY RD 420

City LINN State MO Zip Code 65051

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7804

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	0	8

Amount of Each Disbursement this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
IBEW - COPE

Mailing Address 900 SEVENTH ST NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7775

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	0	8

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional) .....

10625.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

<b>A.</b> Full Name (Last, First, Middle Initial) <b>JEANNE KIRKTON FOR STATE REPRESENTATIVE</b>	<b>Transaction ID:</b> SB29.7742 <b>Date of Disbursement</b>
Mailing Address 659 TUXEDO BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 0 8</div> </div>
City ST LOUIS State MO Zip Code 63119	Amount of Each Disbursement this Period
Purpose of Disbursement DONATION	<div>200.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JEFFERSON COUNTY DEMOCRATIC CLUB</b>	<b>Transaction ID:</b> SB29.7795 <b>Date of Disbursement</b>
Mailing Address 313 JEFFERSON AVE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 1 / 2 0 0 8</div> </div>
City CRYSTAL CITY State MO Zip Code 63019	Amount of Each Disbursement this Period
Purpose of Disbursement DONATION	<div>250.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JIM JACKSON FOR STATE REPRESENTATIVE</b>	<b>Transaction ID:</b> SB29.7863 <b>Date of Disbursement</b>
Mailing Address PO BOX 1167	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 4 / 2 0 0 8</div> </div>
City WARRENSBURG State MO Zip Code 64093	Amount of Each Disbursement this Period
Purpose of Disbursement DONATION	<div>325.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**775.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.** Full Name (Last, First, Middle Initial)  
KERI COTTRELL FOR STATE REPRESENTATIVE

Mailing Address 15159 WOODMANN CIR

City CANTON State MO Zip Code 63435

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7754

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 7 / 1 5 / 2 0 0 8

Amount of Each Disbursement this Period

325.00

**B.** Full Name (Last, First, Middle Initial)  
KRISTI KENNEY FOR STATE REP

Mailing Address 221 S SECOND ST

City CLINTON State MO Zip Code 64735

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7826

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

325.00

**C.** Full Name (Last, First, Middle Initial)  
LINCOLN COUNTY DEMOCRAT CLUB

Mailing Address 164 GORGET DR

City TROY State MO Zip Code 63379

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7849

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 0 4 / 2 0 0 8

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)

MANNING FOR A BETTER MISSOURI

Mailing Address 2801 NORTHWOODS LN

City State Zip Code  
ST PETERS MO 63376

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7824

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 8 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

325.00

**B.**

Full Name (Last, First, Middle Initial)

NINTH WARD DEMOCRATIC ORGANIZATION

Mailing Address 1908 ARSENAL ST

City State Zip Code  
ST LOUIS MO 63118

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7784

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 7 / 3 0 / 2 0 0 8

Amount of Each Disbursement this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

NIXON FOR GOVERNOR

Mailing Address PO BOX 11418

City State Zip Code  
JEFFERSON CITY MO 65105

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7844

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 9 / 0 4 / 2 0 0 8

Amount of Each Disbursement this Period

15000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)

NORTH COUNTY CITIZEN GROUP LLC

Mailing Address PO BOX 65

City  
HAZELWOOD

State  
MO

Zip Code  
63032

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7748

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)

NORTH COUNTY LABOR CLUB

Mailing Address 7808 WINDWARD DRIVE

City  
ST. LOUIS

State  
MO

Zip Code  
63121

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7838

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

OAKVILLE DEMOCRATIC ORGANIZATION

Mailing Address PO BOX 510271

City  
ST LOUIS

State  
MO

Zip Code  
63151

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7807

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1800.00

**TOTAL** This Period (last page this line number only) .....

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29	<input type="checkbox"/>	30b

ELECTRICAL WORKERS VOLUNTARY, POL, EDU &amp; LEG FUND IBEW LOCAL UNION NO 1

1350.00

325.00

200.00

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.** Full Name (Last, First, Middle Initial)  
RE-ELECT REBECCA MCCLANAHAN

Mailing Address PO BOX 634

City KIRKSVILLE State MO Zip Code 63501

Purpose of Disbursement  
DONATION

Candidate Name  
ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND  
IBEW LOCAL UNION NO 1

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

**B.** Full Name (Last, First, Middle Initial)  
RUSS CRAVEN FOR COUNTY COUNCIL

Mailing Address PO BOX 1732

City O FALLON State MO Zip Code 63366

Purpose of Disbursement  
DONATION

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7744

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.00

**C.** Full Name (Last, First, Middle Initial)  
SANDRA AUST FOR MISSOURI SENATE

Mailing Address 4380 NORTH OAK TRAFFICWAY

City KANSAS CITY State MO Zip Code 64116

Purpose of Disbursement  
DONATION

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7859

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

A.

Full Name (Last, First, Middle Initial)

SCAVUZZO FOR STATE REP

Mailing Address PO BOX 124

City  
HARRISONVILLE

State  
MO

Zip Code  
64706

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7858

Date of Disbursement

09 / 04 / 2008

Amount of Each Disbursement this Period

325.00

B.

Full Name (Last, First, Middle Initial)

ST LOUIS CITY LABOR LEGISLATIVE CLUB

Mailing Address 5243 CREIGHTON DR

City  
ST LOUIS

State  
MO

Zip Code  
63123

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7803

Date of Disbursement

08 / 21 / 2008

Amount of Each Disbursement this Period

200.00

C.

Full Name (Last, First, Middle Initial)

TEAM EAGLETON

Mailing Address 116 LOCKWOOD AVE

City  
WEBSTER GROVES

State  
MO

Zip Code  
63119

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7769

Date of Disbursement

07 / 21 / 2008

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1025.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ELECTRICAL WORKERS VOLUNTARY, POL, EDU & LEG FUND IBEW LOCAL UNION NO 1

**A.**

Full Name (Last, First, Middle Initial)

VOTE TROUT

Mailing Address 107 COLLEGE AVE

City  
WEBSTER GROVES

State  
MO

Zip Code  
63119

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

675.00

**B.**

Full Name (Last, First, Middle Initial)

WARREN COUNTY DEMOCRATIC CLUB

Mailing Address 20101 SOUTHWOOD ESTATES RD

City  
WARRENTON

State  
MO

Zip Code  
63383

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7758

Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.00

**C.**

Full Name (Last, First, Middle Initial)

WARREN COUNTY LABOR LEGISLATIVE CLUB

Mailing Address 23304 LOST CREEK RD

City  
WARRENTON

State  
MO

Zip Code  
63383

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7759

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

**SUBTOTAL** of Disbursements This Page (optional) .....

840.00

**TOTAL** This Period (last page this line number only) .....

63500.00